

June 22, 2015

Charlie D. Mattingly
President
The Dunnell Telephone Company
c/o VNC Enterprises
235 Dennard Street
Longview, TX 75605
P.O. Box 733
Judson, TX 75660
(903)663-0099

Marlene H. Dortch Secretary Federal Communications Commission 445 12<sup>th</sup> Street, SW Washington, D.C. 20554

RE: REQUEST FOR CONFIDENTIAL TREATMENT: Connect America Fund; High Cost Universal Service Support IN WC DOCKET NOS. 10-90, 07-135, 05-337, 03-109, CC DOCKET NOS. 01-92, 96-45, GN DOCKET NO. 09-51, WT DOCKET NO. 10-208, BEFORE THE FEDERAL COMMUNICATIONS COMMISSION

### Dear Ms. Dortch:

Please find attached with this letter a request for confidential treatment for portions of information submitted with our company Form 481 along with four copies. Contemporaneously, we are filing a copy of the redacted Form 481, with redacted attachments, via ECFS. This information has also been filed with our state commission and electronically submitted, and certified, with the Universal Service Administration Company. If you have any questions or concerns with the attachments, please contact Charles Curtis at Charles.curtis@contaegis.com or by phone at 252-514-2203.

Sincerely,

Charlie Mattingly

Cc: file



# FEDERAL COMMUNICATIONS COMMISSION Washington, D.C. 20554 WC Docket No. 10-90 WC Docket No. 07-135 WC Docket No. 11-42 High-Cost Universal Service Support WC Docket No. 05-337

Before the

### Lifeline and Link Up Reform WC Docket No. 03-109 CC Docket No. 01-92

In the Matter of

Connect America Fund

CC Docket No. 96-45 GN Docket No. 09-51 WT Docket No. 10-208

# REQUEST FOR CONFIDENTIAL TREATMENT

The Nova Telephone Company ("Filer") requests that the portions of its Form 481 pertaining to its Five Year Plan in the Service Quality Improvement Reporting, its Tribal Land Offerings documentation and its Rate of Return Additional Documentation (RUS Annual Report) be granted confidential, non-public treatment pursuant to Sections 0.457 and 0.459 of the Commission's rules, 47 C.F.R. Sections 0.457, 0.459, and related provisions of the Freedom of Information Act ("FOIA"), including 5 U.S.C. Section 552(b)(4) ("Exemption 4"). Form 481 contains information regarding the Filer's capital expenditure budgets, detailed network information as well as sensitive financial information filed in the Rate of Return Documentation. Release of such information would supply its competition sensitive commercial information that would undermine its ability to serve its customers effectively. Such information is not customarily disclosed to the public or made available within the telecommunications industry. Therefore, the Filer requests confidentiality of these respective portions of its Form 481 filing be granted. Support for the Filer's request for confidential treatment pursuant to FCC rules in Section 0.459(b) is provided as follows:

- FILER'S FORM 481 SATISFY THE REQUIREMENTS OF SECTION 0.459 OF THE COMMISSION'S RULES L The material the Filer seeks confidentiality qualifies for the requirements outlined in Section 0.459 if the FCC's rules. As will be demonstrated, the Filer has satisfied all the elements of this section, concluding that disclosure of this information would be harmful to the Filer.
  - (1) Identification of the specific information for which confidential treatment is sought. The Filer requests confidential treatment for the portions of the Form 481 required by 47 C.F.R. Section 54.313(a)(2) and (4). The Form bears the legend "CONFIDENTIAL INFORMATION SUBJECT TO PROTECTIVE ORDER IN WC DOCKET NO.'S 10-90, 07-135, 05-337, 03-109, CC DOCKETS 01-92, 96-45, GN DOCKET NO. 09-51, WT

# The Dunnell Telephone Company P O Box 728 Judson TX 75660 Office: (903) 663-0099 Fax: (713) 634-2643

DOCKET NO. 10-208, BEFORE THE FEDERAL COMMUNICATION COMMISSION." The specific information considered confidential include: 1) The Filer's 5 year capital budget and network information associated with Service Quality Improvement Reporting (100), 2) ROR Additional Documentation which represents financial reports for calendar year 2014 (3005).

- (2) Identification of the Commission proceeding in which the information was submitted or a description of the circumstances giving rise to the submission. The information is required to be produced annually in accordance with 47 C.F.R. Section 54.313(a). The proceedings are WC Docket No. 10-90 and WC Docket No. 11-42.
- (3) Explanation of the degree to which the information is commercial or financial, or contains a trade secret or is privileged. The information requested for confidential treatment is information not customarily released to the public. Release of this information would have the effect of substantial harm to the competitive position of the Filer.
- (4) Explanation of the degree to which the information concerns a service that is subject to competition.

  All of the services provided by the Filer are subject to competition.
- (5) Explanation of how disclosure of the information could result in substantial competitive harm. Identification of network details could enable wrongdoers the ability to compromise network reliability to customers. In addition, competitive entities in the Filer's area would have access to sensitive network, strategic and financial details that would hamper the Filer's ability to effectively compete.
- (6) Identification of any measures taken by the submitting party to prevent unauthorized disclosure. The information filed is not customarily released to the public or publically made available within the telecommunications industry. The information is also only released within internal circulation, including its attorneys, consultants and engineers, held to confidentiality agreements. The request as well as the associated documents subject to it, are filed both paper copy as well as electronically.
- (7) Identification of whether the information is available to the public and the extent of any previous disclosure of the information to third parties. None of the information requesting confidential treatment is available to the public and have not been disclosed to parties unless those parties are engaged to perform services for the Filer, under non-disclosure.
- (8) Justification of the period during which the submitting party asserts that material should not be available for public disclosure. Due to the fact that the nature of the information being filed is sensitive in terms of competitive and public safety concerns, the Filer requests that confidential treatment be granted indefinitely.

### II. CONCLUSION

For these reasons, pursuant to Sections 0.457 and 0.459 of the Commission's rules, the Filer requests that the portions of Form 481 relating to those particular items listed in I.1, above, be treated as confidential under the Commission's rules and precedent and withheld from public inspection and that any distribution of them within the Commission should be limited, in accordance with the reasons stated for confidential



request. In the case where any person, party or entity wishes to access any of this information, the Filer requests immediate notification so it can have the opportunity to oppose the request or consider any other action it deems necessary to protect both its network, strategic and financial interests and the interest of the customers it continues to serve.

Respectfully Submitted,

Charlie D. Mattingly

President

The Dunnell Telephone Company

c/o VNC Enterprises

235 Dennard Street

Longview, TX 75605

P.O. Box 733

Judson, TX 75660

(903)663-0099

June 22, 2015

| FCC For        | m 481 - Carrier Annual Reporting  Data Collection Form                          |  | FCC Form<br>OMB Cont<br>July 2013   | 481<br>ro) No. 3060-8986/OMB Control No. 3060-0819                              |
|----------------|---|--|---|---|
| <010>          | Study Area Code   | 361381   |   |   |
| <015>          | Study Area Name   | DUNNELL TEL CO   |   |   |
| <020>          | Program Year  | 2016   |   |   |
| <030>          | Contact Name: Person USAC should contact with questions about this data         | Stephanie Curtis   |   |   |
| <035>          | Contact Telephone Number:<br>Number of the person identified in data line <030> | 2525142203 ext.2   |   |   |
| <039>          | Contact Email Address:<br>Email of the person identified in data line <030>     | stephanie@contaegis.   | com   |   |
| ANNUA          | L REPORTING FOR ALL CARRIERS  |  | Carolina Lagrania de Carolina | 54.313 54.422 Completion Completion Required Required (check box when complete) |
| <100>          | Service Quality Improvement Reporting   |  | (complete attached worksheet)   | ~   |
| <200>          | Outage Reporting (voice)  |  | (complete attached worksheet)   |   |
| <210>          |   | outages to report  |   | V   |
| <300>          | Unfulfilled Service Requests (voice)  |  |   | (X  |
| <310>          | Detail on Attempts (voice)  |  |   |   |
|                |   |  | (attach   | descriptive document)   |
| <320>          | Unfulfilled Service Requests (broadband)  |  |   | ~   |
| <330>          | Detail on Attempts (broadband)  |  | (attac  | h descriptive document)   |
| <400>          | Number of Complaints per 1,000 customers (voice)                                |  |   |   |
| <410>          | Fixed   |  |   | V   V   |
| <420><br><430> | Mobile Number of Complaints per 1,000 customers (broadt                         | hand)  |   |   |
| <440>          | Fixed   | Sunay  |   |   |
| <450><br><500> | Mobile<br>Service Quality Standards & Cons                                      | pliance  | (check to indicate certification)   | V V   |
|                | 361381mn510.pdf   |  |   |   |
| <510>          |   | »:   | (attached descriptive document  |   |
|                | :   | 4  |   |   |
| <600>          | Functionality in Emergency Situations   |  | (check to indicate certification)   | V   |
|                | 361381mn610.pdf   |  |   |   |
|                |   |  | (attached descriptive document)   |   |
| <610>          | 1   |  |   |   |
| <700>          | Company Price Offerings (voice)   |  | (complete attached worksheet)   |   |
| <710>          | Company Price Offerings (broadband)   |  | (complete attached worksheet)   |   |
| <800><br><900> | Operating Companies and Affiliates Tribal Land Offerings (Y/N)?                 | (if ve   | (complete attached worksheet)<br>s, complete attached worksheet)  | V   |
|                | Voice Services Rate Comparability Certification                                 | Yes  |   | · .   |
|                | 361381mn1010.pdf  |  |   |   |
| <1010          | £ 100   | ž.   | (attach descriptive document)   | ~   |
| <1100>         | Certify whether terrestrial backhaul options exist ()                           | Yes or No)   O   | (if not, check to indicate certifica  | tion)   |
| <1110>         |   |  | (complete attached worksheet)   |   |
| <1200>         | Price Cap Carriers, Proceed to Price Cap Additional                             | Documentation Worksh   | (complete attached warksheet)   |   |
|                | Including Rate-of-Return Carriers affiliated with Pri                           | Territoria de la Companya del Companya de la Companya del Companya de la Companya |   |   |
| <2000>         | management of metallical application with File                                  | and and account and intering a   | (check to indicate certification)   |   |
| <2005>         | Pate of Poture Carriers Brasened to BOD Additional                              | Documentation Waster   | (complete attached worksheet)   |   |
| <3000>         | Rate of Return Carriers, Proceed to ROR Additional                              | Documentation works  | (check to indicate certification)   | V   |
| <3005>         |   |  | (complete attached worksheet)   |   |

|       | ervice Quality Improvement Reporting<br>Illection Form   |                     |                    | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819<br>July 2013 |
|-------|--|---------------------|--------------------|--|
| <010> | Study Area Code  | 361381              | 4                  |  |
| <015> | Study Area Name  | DUNNELL TEL CO      |                    |  |
| <020> | Program Year   | 2016                |                    |  |
| <030> | Contact Name - Person USAC should contact regarding this data  | Stephanie Curt      |                    |  |
| <035> | Contact Telephone Number - Number of person identified in data line <030>  | 2525142203 ext      | .2                 |  |
| <039> | Contact Email Address - Email Address of person identified in data line <030>  | stephanie@cont      | aegis.com          |  |
| <110> | Has your company received its ETC certification from the FCC?  | (yes /              | no) O O            | ž – 8  |
| <111> | If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?  | (yes /              | no) O O            |  |
| <112> | If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only |                     | 361381mn112.pdf    |  |
|       | required to address voice telephony service.   |                     |                    |  |
|       | me ji  |                     |                    | Name of Attached Document  |
|       | Please select the appropriate responses below (Yes, No, Not Applicable) to confit that the attached document(s), on line 112, contains a progress report on its five service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.  | e-year              |                    | Name of Attached bocument  |
| <113> | Maps detailing progress towards meeting plan targets   |                     | Yes                | 7  |
| <114> | Report how much universal service (USF) support was received   |                     | Yes                |  |
| <115> | How much (USF) was used to improve service quality and how support was used to impro   | ove service quality | Yes                | 7  |
| <116> | How much (USF) was used to improve service coverage and how support was used to imp  |                     |                    | =  |
| <117> | How much (USF) was used to improve service capacity and how support was used to impr   |                     |                    | =  |
| <118> | Provide an explanation of network improvement targets not met in the prior calendar year.  |                     | Yes Not Applicable |  |

| Part of the Control o | rice Outage Re<br>ection Form | eporting (Voic       | <b>(e)</b>           |                    |                    |                                 |                              |  | OM  | Form 481<br>IB Control No. 3050<br>2013      | 0986/OMB Control N           | o. 3060-0819               |
|--|-------------------------------|----------------------|----------------------|--------------------|--------------------|---------------------------------|------------------------------|--|---|--|------------------------------|----------------------------|
| <010>  | Study Area Co                 | ode                  |                      |                    |                    | 361381                          |                              |  |   |  |                              |                            |
| <015>  | Study Area Na                 | ame                  |                      |                    |                    | DUNNELL TEL                     | co                           |  |   |  |                              |                            |
| <020>  | Program Year                  | r.<br>X              |                      |                    |                    | 2016                            |                              |  |   |  |                              |                            |
| <030>  | Contact Name                  | - Person USAC        | Should contac        | t regarding this   | s data             | Stephanie C                     | urtis                        | Nil                                      |   |  |                              |                            |
| <035>  | Contact Telep                 | hone Number          | - Number of pe       | rson identified    | in data line <0    | 30> 2525142203                  | ext.2                        |  |   |  |                              |                            |
| <039>  |                               | Address - Ema        |                      |                    |                    |                                 | ontaegis.com                 |  |   |  |                              |                            |
| <220>  | <a></a>                       | <b1></b1>            | <b2></b2>            | <b3></b3>          | <b4></b4>          | <c1></c1>                       | <c2></c2>                    | <d></d>                                  | <e></e>   | <f>Did This Outage</f>                       | <g></g>                      | <h></h>                    |
|  | Reference<br>Number           | Outage Start<br>Date | Outage Start<br>Time | Outage End<br>Date | Outage End<br>Time | Number of<br>Customers Affected | Total Number of<br>Customers | 911 Facilities<br>Affected<br>(Yes / No) | Service Outage<br>Description (Check<br>all that apply) | Affect Multiple<br>Study Areas<br>(Yes / No) | Service Outage<br>Resolution | Preventative<br>Procedures |
|  |                               |                      |                      |                    |                    |                                 |                              |  |   |  |                              |                            |
|  |                               |                      |                      |                    |                    |                                 |                              |  |   |  |                              |                            |
|  |                               |                      |                      |                    |                    |                                 |                              |  |   |  |                              |                            |
|  |                               |                      |                      |                    |                    |                                 |                              |  |   |  |                              |                            |
|  |                               |                      |                      |                    |                    |                                 |                              |  |   |  |                              |                            |
|  |                               |                      |                      |                    |                    |                                 |                              |  |   |  |                              |                            |
|  |                               |                      |                      |                    |                    |                                 |                              |  |   |  |                              |                            |
|  |                               |                      |                      |                    |                    | 4                               |                              |  |   |  |                              |                            |

| 10955 (100%)提出V | ce Offerings including Voice Rate Data<br>ection Form  |                         | FCC Form 481<br>OMB Control No. 3050-0986/OMB Control No. 3060-0819<br>July 2013 |  |  |  |
|-----------------|--|-------------------------|--|--|--|--|
| <010>           | Study Area Code  | 361381                  |  |  |  |  |
| <015>           | Study Area Name  | DUNNELL TEL CO          |  |  |  |  |
| <020>           | Program Year   | 2016                    |  |  |  |  |
| <030>           | Contact Name - Person USAC should contact regarding this data  | Stephanie Curtis        |  |  |  |  |
| <035>           | Contact Telephone Number - Number of person identified in data line <030>                                    | 2525142203 ext.2        |  |  |  |  |
| <039>           | Contact Email Address - Email Address of person identified in data line <030>                                | stephanie@contaegis.com |  |  |  |  |
| <701><br><702>  | Residential Local Service Charge Effective Date  1/1/2015 Single State-wide Residential Local Service Charge |                         |  |  |  |  |

| <a1></a1> | <a2></a2>       | <83>       | <b1></b1> | <b2></b2>                         | <br><b3></b3>                | <b4></b4>                   | <bs></bs> 4b5>                            |                             |
|-----------|-----------------|------------|-----------|-----------------------------------|------------------------------|-----------------------------|---|-----------------------------|
| State     | Exchange (ILEC) | SAC (CETC) | Rate Type | Residential Local<br>Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area<br>Service Charge | Total per line Rates and Fe |
|           |                 |            |           |                                   |                              |                             |   |                             |
|           |                 |            |           |                                   |                              |                             |   |                             |
|           |                 |            |           | -                                 |                              |                             |   |                             |
|           |                 |            |           |                                   |                              |                             |   |                             |
| _         |                 |            |           | See a                             | ttached worksheet            |                             |   |                             |
|           | -               |            |           |                                   |                              |                             | -   |                             |
|           |                 |            |           |                                   |                              |                             |   |                             |
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|           |                 |            |           |                                   |                              |                             |   |                             |
|           | -               |            |           |                                   |                              |                             |   |                             |

| Data Col | padband Price Offerings<br>lection Form  |                          | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819<br>July 2013 |
|----------|--|--------------------------|--|
| <010>    | Study Area Code  | 361381                   |  |
| <015>    | Study Area Name  | DUNNELL TEL CO           |  |
| <020>    | Program Year   | 2016                     |  |
| <030>    | Contact Name - Person USAC should contact regarding this data                  | Stephanie Curtis         |  |
| <035>    | Contact Telephone Number - Number of person identified in data line <030>      | 2525142203 ext.2         |  |
| -020-    | Contract Consil Address Consil Address of severa identified in data line 2020s | etophyrielegentaegie com |  |

| > <a1> <a1></a1></a1> | √i              | 6815 E           | <b2></b2>               | Ke>                 | - Kd1>  | cd2>                                       | <d3></d3>               | ed4>  |
|-----------------------|-----------------|------------------|-------------------------|---------------------|---|--|-------------------------|---|
| State                 | Exchange (ILEC) | Residential Rate | State Regulated<br>Fees | Total Rate and Fees | Broadband Service -<br>Download Speed<br>(Mbps) | Broadband Service -<br>Upload Speed (Mbps) | Usage Allowance<br>(GB) | Usage Allowance<br>Action Taken When<br>Limit Reached (select |
|                       |                 |                  |                         |                     |   |  |                         |   |
|                       |                 |                  |                         |                     |   |  |                         |   |
|                       |                 |                  |                         |                     |   |  |                         |   |
|                       |                 |                  |                         |                     |   |  |                         |   |
|                       |                 |                  | - See attac             | ned                 |   |  |                         |   |
|                       |                 |                  | worksheet -             |                     |   |  |                         |   |
|                       |                 |                  |                         |                     |   |  |                         |   |
|                       |                 |                  |                         |                     |   |  |                         |   |
|                       |                 |                  |                         |                     |   |  |                         |   |
|                       |                 |                  | -                       |                     |   |  |                         |   |
|                       |                 |                  |                         |                     |   |  |                         |   |
|                       |                 |                  |                         |                     |   |  |                         |   |
|                       |                 |                  |                         |                     |   |  |                         |   |

|       | erating Companies<br>lection Form                             |   |                         | FCC Form 481<br>OMB Control No. 3050-0986/OMB Control No. 3060-0819<br>July 2013   |
|-------|---|---|-------------------------|--|
| <010> | Study Area Code   |   | 361381                  |  |
| <015> | Study Area Name   |   | DUNNELL TEL CO          |  |
| <020> | Program Year  |   | 2016                    |  |
| <030> | Contact Name - Person USAC should contact regarding this data |   | Stephanie Curtis        |  |
| <035> | Contact Telephone Nun   | nber - Number of person identified in data line <030> | 2525142203 ext.2        |  |
| <039> | Contact Email Address   | Email Address of person identified in data line <030> | stephanie@contaegis.com |  |
| <810> | Reporting Carrier   | Dunnell Telephone Company                             |                         | *  |
| <811> | Holding Company   | KCL, LLC  |                         |  |
| <812> | Operating Company   | Dunnell Telephone Company                             |                         | The state of the s |

| 13> | cally the second of the second | <a2></a2> | <b>沙宝 加</b> 星 <b>(433)</b>                     |
|-----|--|-----------|--|
|     | Affiliates   | SAC       | Doing Business As Company or Brand Designation |
|     |  |           |  |
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| 100 H (250 H) 200 H) | oal Lands Reporting<br>ection Form   |  | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819<br>July 2013 |
|----------------------|--|--|--|
| <010>                | Study Area Code  | 361381                                   |  |
| <015>                | Study Area Name  | DUNNELL TEL CO                           |  |
| <020>                | Program Year   | 2016                                     |  |
| <030>                | Contact Name - Person USAC should contact regarding this data  | Stephanie Curtis                         |  |
| <035>                | Contact Telephone Number - Number of person identified in data line <030   | )> 2525142203 ext.2                      |  |
| <039>                | Contact Email Address - Email Address of person identified in data line <03  | O> stephanie@contaegis.co                | om   |
| <910>                | Tribal Land(s) on which ETC Serves   |  |  |
| <920>                | Tribal Government Engagement Obligation  |  | Name of Attached Document  |
| to confin            | rm the status described on the attached document(s), on line 920, trates coordination with the Tribal government pursuant to 8(a)(9) includes: | Select<br>Yes or No cr<br>Not Applicable |  |
| <921>                | Needs assessment and deployment planning with a focus on Tribal community anchor institutions.   |  |  |
| <922>                | Feasibility and sustainability planning;   |  |  |
| <923>                | Marketing services in a culturally sensitive manner;   |  |  |
| <924>                | Compliance with Rights of way processes  |  |  |
| <925>                | Compliance with Land Use permitting requirements   |  |  |
| <926>                | Compliance with Facilities Siting rules  |  |  |
| <927>                | Compliance with Environmental Review processes   |  |  |
| <928>                | Compliance with Cultural Preservation review processes   |  |  |
| <929>                | Compliance with Tribal Business and Licensing requirements.  |  |  |

| 15     | o Terrestrial Backhaul Reporting<br>llection Form  | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819<br>July 2013 |
|--------|--|--|
| <010>  | Study Area Code  | 361381   |
| <015>  | Study Area Name  | DUNNELL TEL CO   |
| <020>  | Program Year   | 2016   |
| <030>  | Contact Name - Person USAC should contact regarding this data  | Stephanie Curtis   |
| <035>  | Contact Telephone Number - Number of person identified in data line <030>  | 2525142203 ext.2   |
| <039>  | Contact Email Address - Email Address of person identified in data line <030>  | stephanie@contaegis.com  |
| <1120> | Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).   |  |
| <1130> | Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g). | kbps   |
|        |  |  |
|        |  |  |

| (1200) Te<br>Lifeline | rms and Condition for Lifeline Customers  | FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0 | 819 |
|-----------------------|---|--|-----|
| Data Coll             | ection Form   | July 2013  |     |
| <010>                 | Study Area Code   | 361381   |     |
| <015>                 | Study Area Name   | DUNNELL TEL CO   |     |
| <020>                 | Program Year  | 2016   |     |
| <030>                 | Contact Name - Person USAC should contact regarding this data   | Stephanie Curtis   |     |
| <035>                 | Contact Telephone Number - Number of person identified in data line <030>   | 2525142203 ext.2   |     |
| <039>                 | Contact Email Address - Email Address of person identified in data line <030>   | stephanie@contaegis.com  |     |
| <1210>                | Terms & Conditions of Voice Telephony Lifeline Plans  | 61381mn:210.pdf  |     |
| <1220>                | Link to Public Website  | Name of Attached Document                                      |     |
| or the we             | neck these boxes below to confirm that the attached document(s), on line 1210, bsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report: |  |     |
| <1221>                | Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,   |  |     |
| <1222>                | Details on the number of minutes provided as part of the plan,  |  |     |
| <1223>                | Additional charges for toll calls, and rates for each such plan.  | 9  |     |

| Data Colle | ice Cep Carrier Additional Documentation<br>ection Form<br>Rate-of-Return Carriers affiliated with Price Cap Local Exchange Corriers   |  | PCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 306<br>July 2013  | 50-0819   |
|------------|--|--|---|-----------|
| <010>      | Study Area Code  |  |   |           |
| <015>      | Study Area Name  | 361381   |   |           |
| <020>      | Program Year   | DUNNELL TEC CO   |   |           |
| <030>      | Contact Name - Person USAC should contact regarding this data  | 2016   |   |           |
| <035>      | Contact Telephone Number - Number of person identified in data line <030>  | Stephanie Curtis   |   | = 0.54    |
| <039>      | Contact Email Address - Email Address of person identified in data line <030>  | 2525142203 ext.2<br>stephanie@contaegis.com  |   |           |
| Solert the | a appropriate responses below (Yes. No. Not Applicable) to note compliance as  | 3300000 - 000 - 12 W ASSESSMENT - 2590   | I support, frozen High Cost support, High Cost support to offset access charge re   | eductions |
|            | America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The inform  | 이 없었다. "이 가장 이 이 이번 이 가게 되었다면 하지만 하는 것이 없는 것이 없는 것이 없는 것이다.  | 하는데 생물이 있었다. 그런데 얼마나 그들은 이 없는데 얼마나 나를 하고 있다면서 하는데 그런데 하는데 나를 하는데 되었다. 그런데 하는데 나를 하는데 나를 하는데 | Luccions  |
| 2210       | Incremental Connect America Phase I reporting  |  |   |           |
| <2010>     | 2nd Year Certification (47 CFR § 54.313(b)(1)i)  |  |   |           |
| <2011a>    | 3rd Year Certification {47 CFR § 54.313(b)(1)ii}   |  |   |           |
| <2011b>    | Attachment {47 CFR § 54.313(b)(1)ii}   |  |   |           |
|            |  | Name of Attached Docum   | ament(s) Listing Required Information   |           |
|            | Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a))  | 5-11-  |   |           |
| <2012>     | 2013 Frozen Support Calculation (47 CFR § 54.313(c)(1))  |  |   |           |
| <2013>     | 2014 Frozen Support Calculation {47 CFR § 54.313(c)(2)}  |  |   |           |
| <2014>     | 2015 Frozen Support Calculation (47 CFR § 54.313(c)(3))  |  |   |           |
| <2015>     | 2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4))   | _  |   |           |
|            | Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))   |  |   |           |
| <2016>     | Certification Support Used to Build Broadband  | , I  |   |           |
|            | Connect America Phase II Reporting (47 CFR § 54.313(e))  |  |   |           |
| <2017>     | Sid year biobabana Service Certification   |  |   |           |
| <2018>     | Stil year broadband Service Certification  | <u></u>  |   |           |
| <2019>     |  | L  |   |           |
| <2020>     | Please check the box to confirm that the attached document(s), on lin<br>pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support si<br>addresses of community anchor institutions to which began providing<br>preceding calendar year. | 2 2021,contains the required information all provide the number, names, and access to broadband service in the |   |           |
| <2021>     | Interim Progress Community Anchor Institutions   |  | -   |           |
|            |  |  |   |           |

|          | ate Of Return Carrier Additional Documentation  | FCU Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819  |
|----------|---|--|
|          |   | July 2013  |
| -        |   |  |
| <010>    | Study Area Code   | 361381   |
| <015>    | Study Area Name Program Year  | 2016   |
| <030>    | Contact Name - Person USAC should contact regarding this data   | Z016<br>Stephanie Curtis   |
| <035>    | Contact Telephone Number - Number of person identified in data line <030>   | 2525142203 ext.2   |
| <039>    | Contact Email Address - Email Address of person identified in data line <030>   | stephanie@contaeqis.com  |
| CHECK    |   | nt to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47  |
|          | CFR 9 54.525(1)(2). I further certify that to   | he information reported on this form and in the documents attached below is accurate.  361381mn3010.pdf  |
|          |   | 302301mily0701pd1  |
| (3010)   | Progress Report on 5 Year Plan  | 1  |
| (sero)   | Milestone Certification (47 CFR § 54.313(f)(1)(i))  |  |
|          |   | Name of Attached Document Listing Required Information   |
|          |   | NAME OF THE PROPERTY OF THE PR |
|          | Please check this box to confirm that the attached document(s), on line \$ 54.313 (f)(1)(ii), the carrier shall provide the number, names, and add providing access to broadband service in the preceding calendar year.  |  |
|          |   | 361381mn3012.pdf   |
|          |   |  |
| (3012)   | Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))   | 1  |
| 1 200000 |   |  |
|          |   | Name of Attached Document Listing Required Information   |
| (3013)   | Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))  | (Yes/No)   |
|          | If yes, does your company file the RUS annual report  | (Yes/No)   |
|          |   |  |
| Please   |   | 7, contains the required information pursuant to § 54.313(f)(2) compliance requires:   |
| (3015)   | Electronic copy of their annual RUS reports (Operating Report for   | 4  |
|          | Telecommunications Borrowers)   |  |
| (3016)   | Document(s) for Balance Sheet, Income Statement and Statement of Ca   | Ash Flows  |
|          |   |  |
| (3017)   | If the response is yes on line 3014, attach your company's RUS annual   | 1  |
| 41.00    | report and all required documentation   | I I  |
|          |   |  |
|          |   | Name of Attached Document Listing Required Information   |
| (3018)   | If the response is no on line 3014, is your company audited?  | (Yes/No)   |
| ******   | Set barrens la servicio de la 2010 et escribito de la barrenta de la composição de l |  |
|          | If the response is yes on line 3018, please check the boxes below to<br>confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains  |  |
| (3019)   | Either a copy of their audited financial statement; or (2) a financial report in a fi   | format as marship to PHS Constring Board for Telegraphy and the Telegr |
| (3023)   | cities a copy of their addition infancial statement, or (2) a implicial report [[] a)   | ormat comparable to NOS Operating Report for Telecommunications  |
| (3020)   | Document(s) for Balance Sheet, Income Statement and Statement of C  | Cash Flows   |
| - 11B    |   | Approximate the latest and approximate the contract of the con |
| (3021)   | Management letter and audit opinion issued by the independent certified p   | ublic accountant that performed the company's financial audit  |
|          | If the response is no on line 3018, please check the boxes below  |  |
|          | to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:  |  |
|          | contains;   |  |
| (3022)   | Copy of their financial statement which has been subject to review by an  | . IEI  |
|          | independent certified public accountant; or 2) a financial report in a  |  |
|          | format comparable to RUS Operating Report for Telecommunications  |  |
|          | Borrowers,  |  |
| (3023)   | Underlying information subjected to a review by an independent certified  |  |
|          | public accountant   | V  |
| (3024)   | Underlying information subjected to an officer certification.   | V  |
| (3025)   | Document(s) for Balance Sheet, Income Statement and Statement of Co   |  |
|          |   | 361381mn3026.pdf   |
|          |   | l l  |
| (3026)   | Attach the worksheet listing required information   | *  |
|          | I   | 1  |
|          |   |  |
|          |   | Name of Attached Document Listing Required Information   |

| (3000) Rate Of Return Carrier Additional Documentation (Continued) |  | FCC Form 481  |
|--|--|---|
| Data Collection Form   |  | OMB Control No. 3060-0986/OM8 Control No. 3060-0819 |
| 医外层性 对所是一位关系系统 "是"。"你  |  | July 2013   |

| <010> | Study Area Code   | 361381                  |
|-------|---|-------------------------|
| <015> | Study Area Name   | DUNNELL TEL CO          |
| <020> | Program Year  | 2016                    |
| <030> | Contact Name - Person USAC should contact regarding this data                 | Stephanie Curtis        |
| <035> | Contact Telephone Number - Number of person Identified in data line <030>     | 2525142203 ext.2        |
| <039> | Contact Email Address - Email Address of person Identified in data line <030> | stephaniefcontaegis.com |

| Einancial | Data Summary |
|-----------|--------------|
|           |              |

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

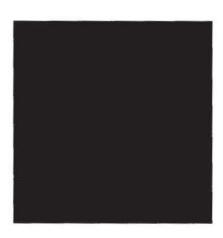
(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



| Data Coll | clon - Reporting Carrier  lection Form  | FCC/Ferm 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819<br>July 2013 |
|-----------|---|--|
| <010>     | Study Area Code   | 361381   |
| <015>     | Study Area Name   | DUNNELL TEL CO   |
| <020>     | Program Year  | 2016   |
| <030>     | Contact Name - Person USAC should contact regarding this data                 | Stephanie Curtis   |
| <035>     | Contact Telephone Number - Number of person identified in data line <030>     | 2525142203 ext.2   |
| <039>     | Contact Email Address - Email Address of person identified in data line <030> | stephanie@contaegis.com  |

# TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

| Certification of Officer as to t  | ne Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients  |
|---|---|
| certify that I am an officer of the reporting carrier; my resprecipients; and, to the best of my knowledge, the information | ensibilities include ensuring the accuracy of the annual reporting requirements for universal service support<br>on reported on this form and in any attachments is accurate.         |
| Name of Reporting Carrier:  |   |
| Signature of Authorized Officer:  | Date  |
| Printed name of Authorized Officer:   |   |
| Title or position of Authorized Officer:  |   |
| Telephone number of Authorized Officer:   |   |
| Study Area Code of Reporting Carrier:   | Filing Due Date for this form:  |
| Persons willfully making false statements on this form can  | be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ S02, S03(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. |

| Data Col | ion - Agent / Carrier<br>ection Form  | FCC Form 481<br>OMB Control No. 3060-0986/OMB Control No. 3060-0819<br>July 2013 |
|----------|---|--|
| <010>    | Study Area Code   | 361381   |
| <015>    | Study Area Name   | DUNNELL TEL CO   |
| <020>    | Program Year  | 2016   |
| <030>    | Contact Name - Person USAC should contact regarding this data                 | Stephanie Curtis   |
| <035>    | Contact Telephone Number - Number of person identified in data line <030>     | 2525142203 ext.2   |
| <039>    | Contact Email Address - Email Address of person identified in data line <030> | stephanie@contaegis.com  |

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

| is authorized to submit the information reported on behalf of the reporting calso certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate. |   |  |  |  |
|---|---|--|--|--|
| Name of Authorized Agent: Charles Curtis  |   |  |  |  |
| Name of Reporting Carrier: DUNNELL TEL CO   |   |  |  |  |
| Signature of Authorized Officer: CERTIFIED ONLINE   | Date: 06/26/2015                          |  |  |  |
| Printed name of Authorized Officer: Charles Mattingly   |   |  |  |  |
| Title or position of Authorized Officer: President  |   |  |  |  |
| Telephone number of Authorized Officer: 9036630099 ext.   |   |  |  |  |
| Study Area Code of Reporting Carrier: 361381  | Filing Due Date for this form: 07/01/2015 |  |  |  |

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

| Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on  | Behalf of Reporting Carrier            |
|---|--|
| , as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipies<br>the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reports | [[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[[ |
| Name of Reporting Carrier: DUNNELL TEL CO   |  |
| Name of Authorized Agent or Employee of Agent: Charles Curtis   |  |
| Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE  | Date: 06/25/2015                       |
| Printed name of Authorized Agent or Employee of Agent: Charles Curtis   |  |
| Title or position of Authorized Agent or Employee of Agent President  |  |
| Felephone number of Authorized Agent or Employee of Agent: 9036630099 ext.  |  |
| Study Area Code of Reporting Carrier: 361381 Filing Due Date for this form: 07/01/2015  |  |

Attachments

| BALLANDON MARKET | ce Offerings Including Voice Rate Data<br>lection Form                        |                         | FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|------------------|---|-------------------------|---|
| <010>            | Study Area Code   | 361381                  |   |
| <015>            | Study Area Name   | DUNNELL TEL CO          |   |
| <020>            | Program Year  | 2016                    |   |
| <030>            | Contact Name - Person USAC should contact regarding this data                 | Stephanie Curtis        |   |
| <035>            | Contact Telephone Number - Number of person identified in data line <030>     | 2525142203 ext.         |   |
| <039>            | Contact Email Address - Email Address of person identified in data line <030> | stephanie@contaegis.com |   |
| <701>            | Residential Local Service Charge Effective Date 1/1/2015                      |                         |   |
| <702>            | Single State-wide Residential Local Service Charge                            |                         |   |

<703>

| cala  | <a2></a2>       | <a3></a3>  | cb1>      | <b2></b2>                         | ×b3> | <b4><b4></b4></b4> | <05> 10 €               | Ko Ko |
|-------|-----------------|------------|-----------|-----------------------------------|------|--------------------|-------------------------|-------|
| State | Exchange (ILEC) | SAC (CETC) | Rate Type | Residential Local<br>Service Rate |      |                    | Mandatory Extended Area |       |
| MN    | Dunnell         | 120        | FR        | 15.5                              |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            | 7.        |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 | -          |           |                                   |      |                    |                         |       |
|       |                 | -          |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |
|       |                 |            |           |                                   |      |                    |                         |       |

| <010> | Study Area Code   | 361381                  |
|-------|---|-------------------------|
| <015> | Study Area Name   | DUNNELL TEL CO          |
| <020> | Program Year  | 2016                    |
| <030> | Contact Name - Person USAC should contact regarding this data                 | Stophanie Curtis        |
| <035> | Contact Telephone Number - Number of person identified in data line <030>     | 2525142203 ext.         |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | stephanie@contaegis.com |

| <711> | <a1> -</a1> | <82>            | <b1></b1>           | <br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br><br> | <o> <d1></d1></o> | <d25< th=""><th><d3></d3></th><th></th><th><d4×< th=""></d4×<></th></d25<> | <d3></d3>                                 |                         | <d4×< th=""></d4×<> |
|-------|-------------|-----------------|---------------------|--|-------------------|--|---|-------------------------|---------------------|
|       | State       | Exchange (ILEC) | Residential<br>Rate | State Regulated<br>Fees  | e u               | Broadband Service -<br>Download Speed<br>(Mbps)                            | Broadband Service<br>-Upload Speed (Mbps) | Usage Allowance<br>(GB) |                     |
|       |             |                 |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   | Since the second second |                     |
|       |             |                 |                     |  |                   |  |   |                         |                     |
|       |             | TAINE - 2.2     |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   |                         |                     |
| 3     |             |                 |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   |                         |                     |
|       |             | -               |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   | 0-17-                   |                     |
|       |             |                 |                     |  |                   | . 1. 1111  |   |                         |                     |
|       |             |                 | -                   |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   |                         | 40.                 |
|       |             |                 |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   | 181  |   |                         | -                   |
|       |             |                 |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   |                         |                     |
|       |             |                 |                     |  |                   |  |   |                         |                     |



Redacted-For Public Inspection

| SAC         |
|-------------|
| WIRE CENTER |
| YEAR FILED  |

|     | 361381      |
|-----|-------------|
|     | DUNNELL, MN |
| 1,7 | 2015        |

|              |       | Planned         | Planned        | Planned      |               |          |          |                |
|--------------|-------|-----------------|----------------|--------------|---------------|----------|----------|----------------|
| Total Square | Total | General Support | Central Office | Cable & Wire | Total Planned | Affected | Affected | 28940          |
|              |       |                 |                |              |               |          |          | % Area<br>100% |
|              |       |                 |                |              |               |          |          | 100%           |
|              |       |                 |                |              |               |          |          | 100%           |
|              |       |                 |                |              |               |          |          | 100%           |
|              |       |                 |                |              |               |          |          | 100%           |
|              |       |                 |                |              |               |          |          | 500%           |

Redacted-For Public Inspection

### **Dunnell Telephone Company**

Study Area Code: 361381

# Response to Line 510 - Service Quality Standards and Consumer Protection Rules

<u>Surpasses PUC minimum service quality standards</u> – The Nova Telephone Company ("Filer") hereby certifies that its voice service surpasses the minimum standards required by the Minnesota Public Service Commission ("MPSC") for eligible telecommunications carriers. Over the history of the Filer's provision of voice services to its customer, it has consistently exceeded those minimum standards.

<u>Publically available rates, terms and conditions</u> - Once more, the Filer's rates, terms and conditions for voice service are publically available through OCC approved local exchange tariffs.

<u>Protection of consumer information</u> - The Filer complies with the Federal Communications Commission Consumer Proprietary Network Information ("CPNI") rules (47 C.F.R. Sections 64.2001-64.2011). The compliance is assured through certification for CPNI compliance by March 1 of each year, in addition to its own internal company procedures. The Filer also complies with all consumer protection rules applicable by State law.

Broadband service rates, quality service standards - The Filer offers wholesale broadband to an unaffiliated third party, rather than retail to its end users. It assures the third party that it provides speeds associated with service plans purchased through its interstate tariff. For example, for lines that subscribe at speeds up to a download speed and upload speed, those speeds are provided. However, those speeds are based on a 'best effort' basis, due to the fact there are several aspects of the broadband network, outside of the Filer's control, that can effect throughput speeds. The interstate tariffs are publically available for rates, terms and conditions. Once more, the Filer has internal procedures to assure that quality of service to broadband customers exceeds expectations. Therefore, although there are no current broadband service quality standards and consumer protection rules, the Filer discloses its rates, terms and conditions of service to its customers. Lastly, the Filer complies with applicable federal and state customer protection standards for all businesses in Ohio.

# **Dunnell Telephone Company**

Study Area Code: 361381

# Response to Line 610 - Ability to Function in Emergency Situations for Voice and Broadband

Dunnell Telephone Company ("Filer") certifies that it is able to function in emergency situations as set forth in both federal and state regulations.

<u>Power</u> - The Filer's network is designed to remain functional in emergency situations where no external power is available. In such cases, the Filer has eight hours of battery backup power for its wire center and field electronics locations. The wire center is also equipped with backup power generators and automatic transfer switches. In addition, the Filer has access to mobile backup generators in case of backup power failure.<sup>1</sup>

Routing and Spikes – The Filer has alternate routes configured in each of its local switch to assure that when the primary routes are down, traffic is re-routed to alternate routes and facilities. In addition, the Filer has overflow routes where traffic spikes may compromise the primary route traffic flows.

<u>Procedures for voice and data</u> - The Filer has internal procedures for emergency situations which includes emergency operations planning. Such procedures and network infrastructure utilized for emergency situations is offered as such for both voice and broadband services.

<sup>&</sup>lt;sup>1</sup> Section 54.202(a)(2)

# **Dunnell Telephone Company**

Study Area Code: 361381

Response to Line 1010 - Voice Services Rate Comparability



### REDACTED - FOR PUBLIC INSPECTION

DUNNELL TELEPHONE COMPANY, INC. DUNNELL, MINNESOTA

Section 4 Page 1

### LOCAL EXCHANGE SERVICE

The rates for Local Exchange Service are subject to the conditions set forth herein and the General Regulations governing provision of service. The General Regulations are set forth in Section 2 of this tariff book.

# Local Exchange Service

- A. The Local Exchange Service Rates in this section are for service only and do not include any terminal equipment beyond the point of demarcation.
- B. The rates applicable to Local Exchange Service are composed of a Line Access Rate component plus (where applicable) an Extended Area Service component.

# C. Service Upgrades

- At the option of the Company, services will be upgraded to business individual line and residence individual line as facilities for the provision of such services permit.
- Upgrading of business and residence services may be accomplished on a line by line basis at the option of the Company.
- As an exchange is upgraded, as set forth in 1) above, the rates shown on the appropriate rate schedule will be applied.

### D. Extended Area Service

- Establishment and discontinuance of EAS will be contingent upon Commission authorization.
- Extended Area Service rate component.
  - EAS is a premium-type service offering made by the Company to certain exchanges, under specific conditions.
  - b) The Extended Area Service rate component, where applicable, is included in the Local Exchange Service Rate.

### E. Taxes

 Applicable taxes levied by state, county and local taxing authorities are in addition to the rates set forth in this tariff. (See also General Regulations, Section 2).

Redacted-For Public Inspection

Effective: 11-1-00

# **REDACTED - FOR PUBLIC INSPECTION**

DUNNELL TELEPHONE COMPANY, INC. DUNNELL, MINNESOTA

Section 4 Page 2

# LOCAL EXCHANGE SERVICE

# Rates

Exchange - All

| Class of Service             | Monthly<br>Rates |
|------------------------------|------------------|
| BUSINESS:                    |                  |
| One Party - Access           | \$ 18.50         |
| PBX Trunk - Access           | 28.50            |
| Basic Coin Telephone Service | 18.50            |
| Key System Line - Access     | 18.50            |
| RESIDENCE:                   |                  |
| One Party                    | 15.50            |

All rates are billed in advance. Payment for service is due when the statement is rendered.

Vacation rate service is available for customers requiring less than 12 months of service per year. The rate for vacation service is determined in accordance with section 5, page 38 of this tariff book.

Redacted-For Public Inspection

Effective: 11-1-00

# **REDACTED - FOR PUBLIC INSPECTION**

DUNNELL TELEPHONE COMPANY, INC. DUNNELL, MINNESOTA

Section 4 Page 3

# LOCAL EXCHANGE SERVICE

Extended Area Service (EAS)

Exchange

EAS to Exchange

Dunnell

Sherburn

Redacted-For Public Inspection

Effective: 11-1-00

Response to Line 3010

Dunnell Telephone Company

Study Area 361381

# Milestone Certification

Pursuant to 47 C.F.R. § 54.202 (a) Dunnell Telephone Company ("Filer") provides this certification that it is taking reasonable steps to provide upon reasonable request broadband speeds of at least 4 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to offerings in urban areas as determined in an annual survey as specified in Public Notice DA 15-470, and that requests for such service are met within a reasonable amount of time. Details for how Filer is meeting its obligations for meeting its goals and required obligations are specified within the FCC Form 481 annual filing.

Response to Line 3012

Dunnell Telephone Company

Study Area 361381

# **Anchor Institutions**

Pursuant to 47 C.F.R. § 54.313 (f)(1)(ii) Dunnell Telephone Company ("Filer") provides this document that contains the number names, and addresses of community anchor institutions to which the ETC newly began providing access to broadband service in the preceding calendar year:

Filer did not begin providing access to broadband service to any community anchor institutions in the preceding calendar year.

Date: 6/26/2015

Name of companies covered by this Certification: Dunnell Telephone Company of Minnesota

I, Charlie Mattingly, certify that I am an officer of Dunnell Telephone Company (Dunnell). Dunnell is an RUS borrower, but is currently finalizing its 2014 financials. Currently, Dunnell has engaged with a CPA to complete a review of its calendar year 2014 accounting and wasn't completed in time for this filing. Therefore, I hereby certify that, notwithstanding a completed review by the CPA, the submitted financials for Dunnell, in accordance with FCC rule 47 C.F.R. Section 54.313(f)(s) are accurate, to the best of my knowledge.

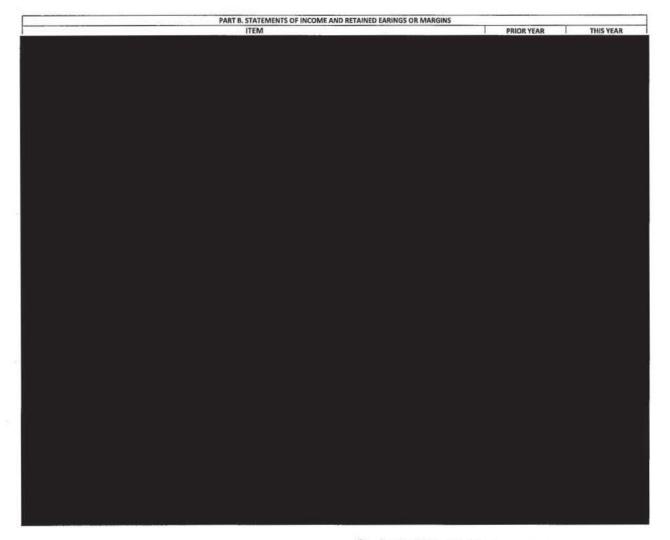
Name of signatory: Charlie Mattingly

Title of signatory: President, Dunnell Telephone Company of Minnesota

| 005a) Operating Report for Privately-Held Rate of Return Carriers        |                     |  | FCC For    | m 481  |                  |            |
|--|---------------------|--|------------|--|------------------|------------|
| alance Sheet - Data Collection Form                                      |                     |  |            | entrol No. 3060-0986   |                  |            |
| age 1 of 3   |                     |  | July 201   | BUTTO A MALE TO A STATE OF THE  |                  |            |
|  |                     |  |            | The state of the s |                  |            |
| :010> Study Area Code  |                     |  | <010>      | 361381   |                  |            |
| :015> Study Area Name  |                     |  | <015>      | Dunnell Telephone Company  |                  |            |
| :020> Program Year   |                     |  | <020>      | 2016   |                  |            |
| 030> Contact Name - Person USAC should contact regarding this dat        |                     |  |            | Kim Starr  |                  |            |
| 035> Contact Telephone Number - Number of person identified in d         |                     |  |            | 903-663-0099   |                  |            |
| :039> Contact Telephone Email Address - Email Address of person ide      | entified in data li | ine <030>  | <039>      | kim@vncenterprises.com   |                  |            |
| Files as reviewed single company   |                     |  |            | ₹ Filed as audited single company  |                  |            |
| Filed as reviewed consolidated company                                   | -                   |  |            | Filed as audited consolidated company —  |                  |            |
| Filed as subsidiary of reviewed consolidated                             | company             | ٠ -  | _          | Filed as subsidiary of audited consolidated company  | 11               |            |
|  |                     | CERTIE   | CATION     | Control of the contro |                  |            |
| e hereby certify that the entries in this report are in accordance with  | the accounts and    |  |            |  | dadas and holisf | _          |
| re hereby certify that the entries in this report are in accordance with | the accounts and    | Differ records by  | Line syste | em and rejiect the status of the system to the best of our know  | neage and benej. |            |
| The last say of the last the last said                                   |                     | DESCRIPTION OF THE PERSON OF T |            |  |                  |            |
| Signature  |                     | Date   |            |  |                  |            |
|  |                     | PART A. BAL  | ANCE SH    | IEET   | -                |            |
|  | BALANCE             | BALANCE END  |            |  | BALANCE          | BALANCE EN |
| ASSETS   | PRIOR YEAR          | OF PERIOD  |            | LIABILTIES AND STOCKHOLDERS' EQUITY  | PRIOR YEAR       | OF PERIOD  |
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FCC Form 481 (3005b) Operating Report for Privately-Held Rate of Return Carriers Balance Sheet - Data Collection Form OMB Control No. 3060-0986 July 2013 Page 2 of 3 <010> Study Area Code <010> 361381 <015> Study Area Name <015> Dunnell Telephone Company <020> Program Year <020> <030> Kim Starr <030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030> <035> 903-663-0099 <039> Contact Telephone Email Address - Email Address of person identified in data line <030> <039> kim@vncenterprises.com



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# (3005c) Operating Report for Privately-Held Rate of Return Carriers Balance Sheet - Data Collection Form

Page 3 of 3

<010> Study Area Code

<015> Study Area Name

<020> Program Year

<030> Contact Name - Person USAC should contact regarding this data

<035> Contact Telephone Number - Number of person identified in data line <030>

<039> Contact Telephone Email Address - Email Address of person identified in data line <030>

FCC Form 481

OMB Control No. 3060-0986

July 2013

<010>

<015> Dunnell Telephone Company

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361381 pany 2016

<030> Kim Starr

<035> 903-663-0099

<039> kim@vncenterprises.com

